UNITED STATES BANKRUPTCY COURT

	Southern DISTRICT	OF Texas
	(Housto	n)
In Re. Spinal Transition and Profess	sional Services LLC §	Case No. 23-90730
Debtor(s)		Lead Case No. 23-90731
Monthly Operating Repo	rt	Chapter 11
Reporting Period Ended: 08/31/2023		Petition Date: <u>06/19/2023</u>
Months Pending: 2		Industry Classification: 3 3 9 1
Reporting Method:	Accrual Basis •	Cash Basis
Debtor's Full-Time Employees (current):	38
Debtor's Full-Time Employees (as of d	ate of order for relief):	112
Statement of cash receipts and	disbursements ammary and detail of the asset or loss statement) assionals assionals assionals assionaling the reporting	•
/s/ Steven Balasiano Signature of Responsible Party 01/22/2023 Date		Steven Balasiano Printed Name of Responsible Party 6701 Bay Parkway, 3rd Flr., Brooklyn, NY 11204
		Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. \S 1320.4(a)(2) applies.

Pa	rt 1: Cash Receipts and Disbursements	Current Month	Cumulative
a.	Cash balance beginning of month	\$0	
b.	Total receipts (net of transfers between accounts)	\$0	\$0
c.	Total disbursements (net of transfers between accounts)	\$0	\$0
d.	Cash balance end of month (a+b-c)	\$0	
e.	Disbursements made by third party for the benefit of the estate	\$0	\$0
f.	Total disbursements for quarterly fee calculation (c+e)	\$0	\$0
	rt 2: Asset and Liability Status or generally applicable to Individual Debtors. See Instructions.)	Current Month	
a.	Accounts receivable (total net of allowance)	\$0	
b.	Accounts receivable over 90 days outstanding (net of allowance)	\$0	
c.	Inventory (Book Market Other (attach explanation))	\$0	
d	Total current assets	\$0	
e.	Total assets	\$0	
f.	Postpetition payables (excluding taxes)	\$0	
	Postpetition payables past due (excluding taxes)	\$0	
g.		<u> </u>	
h.	Postpetition taxes payable	\$0	
1.	Postpetition taxes past due	\$0	
j.	Total postpetition debt (f+h)	\$0	
k.	Prepetition secured debt	\$0	
1.	Prepetition priority debt	\$0	
m.	Prepetition unsecured debt	\$0	
n.	Total liabilities (debt) $(j+k+l+m)$	\$0	
о.	Ending equity/net worth (e-n)	\$0	
Pa	rt 3: Assets Sold or Transferred	Current Month	Cumulative
a.	Total cash sales price for assets sold/transferred outside the ordinary course of business	\$0	\$0
b.	Total payments to third parties incident to assets being sold/transferred		
	outside the ordinary course of business	\$0	\$0
c.	Net cash proceeds from assets sold/transferred outside the ordinary course of business (a-b)	\$0	\$0
Pai	rt 4: Income Statement (Statement of Operations)	Current Month	Cumulative
	ot generally applicable to Individual Debtors. See Instructions.)		C 0.222.03.002 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
a.	Gross income/sales (net of returns and allowances)	\$0	
b.	Cost of goods sold (inclusive of depreciation, if applicable)	\$0	
c.	Gross profit (a-b)	\$0	
d.	Selling expenses	\$0	
e.	General and administrative expenses	\$0	
f.	Other expenses	\$0	
g.	Depreciation and/or amortization (not included in 4b)	\$0	
h.	Interest	\$0	
i.	Taxes (local, state, and federal)	\$0	
j.	Reorganization items		
k.	Profit (loss)	\$0	\$0

Part 5	Profe	essional Fees and Expenses					
				Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
a.	Debto	r's professional fees & expenses (ban	kruptcy) Aggregate Total	\$0	\$0	\$0	\$0
	Itemiz	ed Breakdown by Firm					
		Firm Name	Role				
	i	N/A		\$0	\$0	\$0	\$0
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	iii						
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				Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
b.	Debto	or's professional fees & expe	enses (nonbankruptcy) Aggregate Total	\$0	\$0	\$0	\$0
	Itemi	zed Breakdown by Firm					·
		Firm Name	Role				
	i	N/A		\$0	\$0	\$0	\$0
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Debtor's Name Spinal Transition and Professional Services LLC

	xcix						
	c						
c.	c. All professional fees and expenses (debtor & committees)		\$0	\$0	\$0	\$0	

Pa	rt 6: Postpetition Taxes		Cur	rent Month	Cumulative
a.	Postpetition income taxes accru	ed (local, state, and federal)		\$0	\$0
b.	Postpetition income taxes paid	(local, state, and federal)		\$0	\$0
c.	Postpetition employer payroll ta	ixes accrued		\$0	\$0
d.	Postpetition employer payroll ta	ixes paid		\$0	\$0
e.	Postpetition property taxes paid			\$0	\$0
f.	Postpetition other taxes accrued	(local, state, and federal)		\$0	\$0
g.	Postpetition other taxes paid (lo	cal, state, and federal)		\$0	\$0
Pa	rt 7: Questionnaire - During thi	s reporting period:			
a.	Were any payments made on pro-	epetition debt? (if yes, see Instructions)	Yes •	No 🔿	
b.	Were any payments made outside the ordinary course of business without court approval? (if yes, see Instructions)			No 💿	
c.	Were any payments made to or	on behalf of insiders?	Yes 💿	No 🔘	
d.	Are you current on postpetition	tax return filings?	Yes •	No 🔿	
e.	Are you current on postpetition	estimated tax payments?	Yes 💿	No 🔘	
f.	Were all trust fund taxes remitte	ed on a current basis?	Yes 💿	No 🔘	
g.	Was there any postpetition borro (if yes, see Instructions)	owing, other than trade credit?	Yes 🔿	No 💿	
h.	Were all payments made to or o the court?	n behalf of professionals approved by	Yes •	No O N/A O	
i.	Do you have: Worker's	compensation insurance?	Yes 💿	No 🔘	
	If ye	s, are your premiums current?	Yes 💿	No O N/A O	(if no, see Instructions)
	Casualty	property insurance?	Yes 💿	No 🔘	
	If ye	s, are your premiums current?	Yes 💿	No O N/A O	(if no, see Instructions)
	General 1	iability insurance?	Yes 💿	No 🔘	
	If ye	s, are your premiums current?	Yes 💿	No O N/A O	(if no, see Instructions)
j.	Has a plan of reorganization been filed with the court?			No 🔘	
k.	. Has a disclosure statement been filed with the court?			No 🔘	
1.				No 🔿	

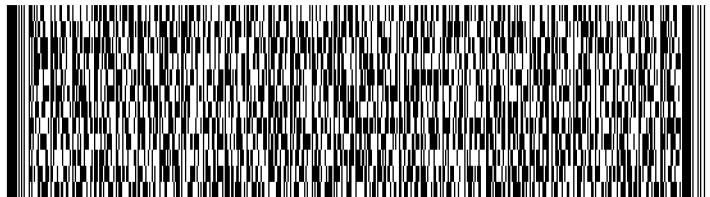
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Debtor's Name Spinal Transition and Professional Services LLC Case No. 23-90730

Par	t 8: Individual Chapter 11 Debtors (Only)						
a.	Gross income (receipts) from salary and wages	\$0					
b.	Gross income (receipts) from self-employment						
c.	Gross income from all other sources						
d.	Total income in the reporting period (a+b+c)	\$0					
e.	Payroll deductions						
f.	Self-employment related expenses						
g.	Living expenses						
h.	All other expenses						
i.	Total expenses in the reporting period (e+f+g+h)	\$0					
j.	Difference between total income and total expenses (d-i)	\$0					
k.	List the total amount of all postpetition debts that are past due	\$0					
1.	Are you required to pay any Domestic Support Obligations as defined by 11 U.S.C § 101(14A)?	Yes O No •					
m.	If yes, have you made all Domestic Support Obligation payments?	Yes O No N/A •					
thr bei is r law ma Ex Re wv	704, 1106, and 1107. The United States Trustee will use this information S.C. § 1930(a)(6). The United States Trustee will also use this information ough the bankruptcy system, including the likelihood of a plan of reorgang prosecuted in good faith. This information may be disclosed to a bank needed to perform the trustee's or examiner's duties or to the appropriate for enforcement agency when the information indicates a violation or potent de for routine purposes. For a discussion of the types of routine disclosur ecutive Office for United States Trustee's systems of records notice, UST cords." See 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the navery justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this aversion of your bankruptcy case or other action by the United States Trustee's Trustee's the United States Trustee's the Uni	on to evaluate a chapter 11 debtor's progress sization being confirmed and whether the case is kruptcy trustee or examiner when the information rederal, state, local, regulatory, tribal, or foreign stial violation of law. Other disclosures may be set that may be made, you may consult the 4-001, "Bankruptcy Case Files and Associated otice may be obtained at the following link: http://sinformation could result in the dismissal or					
I declare under penalty of perjury that the foregoing Monthly Operating Report and its supporting documentation are true and correct and that I have been authorized to sign this report on behalf of the estate.							
/s/	Steven Balasiano Steve	en Balasiano					
Sign	nature of Responsible Party Printed	l Name of Responsible Party					
Pla	n Administrator 01/22	2/2024					

Date

Title



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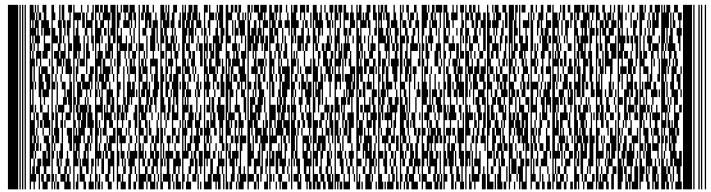
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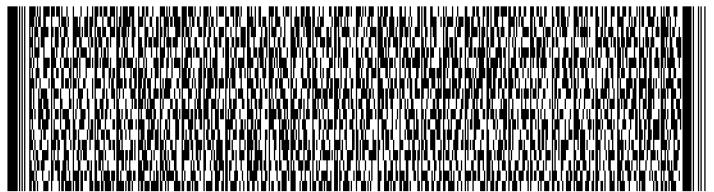
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